

## UNITED STATES DISTRICT COURT

District of

Delaware

DARYL J. CARTER,

Plaintiff,

V.

**SUMMONS IN A CIVIL CASE**

CASE NUMBER:

STANLEY W. TAYLOR, individually; RAPHAEL WILLIAMS, individually;  
 SITTA B. GOMBEH-ALIE, M.D., individually; MUHAMMAD ARIF NIAZ,  
 M.D., individually; CORRECTIONAL MEDICAL SERVICES, INC., a  
 Missouri corporation; CORRECTIONAL MEDICAL SERVICES OF  
 DELAWARE, INC., a Delaware corporation; JOHN DOE MEDICAL  
 PERSONNEL; and JOHN DOE CORRECTIONAL PERSONNEL,

Defendants.

TO: (Name and address of Defendant)

Correctional Medical Services, Inc.  
 c/o National Registered Agents, Inc.  
 160 Greentree Drive, Suite 101  
 Dover, DE 19904

**YOU ARE HEREBY SUMMONED** and required to serve on PLAINTIFF'S ATTORNEY (name and address)

Michael L. Sensor, Esquire  
 Perry & Sensor  
 One Customs House, Suite 560  
 Wilmington, DE 19899-1568  
 (302) 655-4482

an answer to the complaint which is served on you with this summons, within twenty (20) days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

PETER T. DALLOO

CLERK

(By) DEPUTY CLERK

8/24/07

DATE

RECEIVED

AUG 30 2007

AO 440 (Rev. 8/01) Summons in a Civil Action

RETURN OF SERVICE		
Service of the Summons and complaint was made by me <sup>(1)</sup>	DATE	August 29, 2007 (3:31 P.M.)
NAME OF SERVER (PRINT) Jeffrey L. Butler	TITLE	process server
<i>Check one box below to indicate appropriate method of service</i>		
<input type="checkbox"/> Served personally upon the defendant. Place where served: _____		
<input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: _____		
<input type="checkbox"/> Returned unexecuted: _____		
<input checked="" type="checkbox"/> Other (specify): <u>left copies thereof with Debbie Sealund of National Registered Agents Inc. at 160 Greentree Drive, Suite 101, Dover, Delaware 19904 - as registered agent for corporate defendant, Correctional Medical Services, Inc.</u>		
STATEMENT OF SERVICE FEES		
TRAVEL n/a	SERVICES \$50.00	TOTAL \$50.00
DECLARATION OF SERVER		
<p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p> <p>Executed on <u>August 29, 2007</u> Date</p> <p><i>Jeffrey L. Butler</i>  <small>Signature of Server</small>            Legal Beagles, Inc.            P.O. Box 886            New Castle, Delaware 19720-0886</p> <hr/> <p><i>Address of Server</i></p>		

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.